

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

RESPONSE UNDER RULE 116  
EXPEDITED HANDLING PROCEDURES

In re Patent Application of Atty LB-723-1504  
 Dkt. C# M#  
**MIZUKI et al** TC/A.U. 3714  
 Serial No. 10/825,180 Examiner: Leiva, Frank M.  
 Filed: April 16, 2004 Date: January 23, 2009  
 Title: IMAGE PROCESSING APPARATUS AND STORING MEDIUM THAT STORES  
 IMAGE PROCESSING PROGRAM

**Mail Stop AF**

Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Sir:

**RESPONSE/AMENDMENT/LETTER**

This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.

 **Correspondence Address Indication Form Attached.****Fees are attached as calculated below:**

Total effective claims after amendment	<b>10</b>	minus highest number	
previously paid for	<b>20</b>	(at least 20) =	0 x \$52.00
			\$0.00 (1202)/\$0.00 (2202) \$

Independent claims after amendment	<b>2</b>	minus highest number	
previously paid for	<b>3</b>	(at least 3) =	0 x \$220.00
			\$0.00 (1201)/\$0.00 (2201) \$

If proper multiple dependent claims now added for first time, (ignore improper); add  
 \$390.00 (1203)/\$195.00 (2203) \$

Petition is hereby made to extend the current due date so as to cover the filing date of this  
 paper and attachment(s)

One Month Extension	\$130.00 (1251)/\$65.00 (2251)
Two Month Extensions	\$490.00 (1252)/\$245.00 (2252)
Three Month Extensions	\$1110.00 (1253)/\$555.00 (2253)
Four Month Extensions	\$1730.00 (1254)/\$865.00 (2254)
Five Month Extensions	\$2350.00 (1255)/\$1175.00 (2255) \$

Terminal disclaimer enclosed, add  
 \$140.00 (1814) / \$70.00 (2814) \$

Applicant claims "small entity" status.  Statement filed herewith

Rule 56 Information Disclosure Statement Filing Fee	\$180.00 (1806)	\$	0.00
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Assignment Recording Fee	\$40.00 (8021)	\$	0.00
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Other:		\$	0.00
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<b>TOTAL FEE</b>	<b>\$</b>	<b>0.00</b>
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 **CREDIT CARD PAYMENT FORM ATTACHED.**

The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140.

901 North Glebe Road, 11th Floor  
 Arlington, Virginia 22203-1808  
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 LB:tlm

NIXON & VANDERHYE P.C.  
 By Atty: Leonidas Boutsikaris, Reg. No. 61,377

Signature: \_\_\_\_\_ /Leonidas Boutsikaris/